REVISI	AUGUST	, ,		Page 1 OMB No.:	0938-
	STATE	E PLAN UNDER TI	TLE XIX OF	THE SOCIAL S	SECURITY ACT
	State:	Arizona			
		INCOM	E ELIGIBILI	TY LEVELS	
A. MA	NDATORY CAT	EGORICALLY NEED	Y		
1. AF	DC-Related	Groups Other Th	an Poverty	Level Pregna	ant Women and Infants:
<u>Fa</u>	mily Size	Need Standard	l <u>Payme</u>	nt Standard	Maximum Payment Amounts
P1	ease see Pag	ge la of Supple	ment 1 to A	ttachment 2.	6-A
2. Pr	egnant Wome	n and Infants u	nder Section	on 1902(a)(10	0)(i)(IV) of the Act:
		il 1, 1990, bas e poverty level		following per	rcent of the official
		rcent \sqrt{X}	140 po	ercent (no mo	ore than 185 percent)
	<u>Fami</u>	ly Size		Income I	<u>Level</u>
		_1		\$	
		2		\$	
	_	3		\$	
		4		\$	
		5		\$	
TN No.		Approval Data	4/22/03	7.5	Data July 1 1002
Supers TN No.	92-15	Approval Date	11/2/12		ive Date <u>July 1, 1993</u>
				HCFA II	D: 7985E

SUPPLEMENT 1 TO ATTACHMENT 2.6-A

Revision: HCFA-PM-91-4 (BPD) AUGUST 1991

State Plan under Title XIX of the Social Security Act STATE: __Arizona

Income Maximum; Need and Payment Standards

A-1 STANDARD

Number of Persons	185% AFDC Income Maximum	Need Standard	Payment Standard
1	\$1048	\$ 567	\$ 204
2	1415	765	275
3	1783	964	347
4	2149	1162	418
5	2516	1360	489
6	2884	1559	561
7	3250	1757	632
8	3616	1955	703
9	3983	2153	775
10	4349	2351	846
11	4715	2549	917
12	5081	2747	988
13	5448	2945	1060
14	5814	3143	1131
		Extra + 198	

A-2 STANDARD

Number of Persons	185% AFDC Income Maximum	Need Standard	Payment Standard
1	\$ 660	\$ 357	\$128
2	889	481	173
3	1122	607	218
4	1354	732	263
5	1583	856	308
6	1816	982	353
7	2046	1106	398
8	2277	1231	443
9	2508	1356	488
10	2739	1481	533
11	2971	1606	578
12	3202	1731	623
13	3433	1856	668
14	3664	1981	713
		Extra + 125	

These Payment Standards are based on 36% of the 1992 federal poverty level adjusted for family size and a shelter cost factor.

TN. <u>93-20</u> Supersedes TN: <u>None</u>

Approval Date 11/23/93

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ARIZONA

2	C	lamantal	Security	Imaamaa
.).	- 5upp	nemeniai	Security	income:

Individual Federal Benefit Rate:

\$512

Couple Federal Benefit Rate:

\$ 769

300% Individual Federal Benefit Rate:

\$ 1,536

TN No. <u>00-01</u> Supersedes TN No. <u>99-01</u>

Approval Date MAY 1 6 2000

Revision: HCFA-PM-91-1 (MB) SUPPLEMENT 1 TO ATTACHMENT 2.6-A FEBRUARY 1992 Page 2

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Arizona

INCOME ELIGIBILITY LEVELS

A. MANDATORY CATEGORICALLY NEEDY (Continued)

- 3. For children under Section 1902(a)(10)(i)(VI) of the Act (children who have attained age 1 but have not attained age 6), the income eligibility level is 133 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.
- 4. For children under Section 1902(a)(10)(i)(VII) of the Act (children who were born after September 30, 1983 and have attained age 6 but have not attained age 19), the income eligibility level is 100 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

No. 92-1
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TN No. 91-12

AUG 2 5 1992
Effective Date MARCH 31, 1992

INCOME ELIGIBILITY LEVELS (Continued)
B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL
1. Pregnant Women and Infants
The levels for determining income eligibility for optional groups of pregnant women and infants under the provisions of sections $1902(a)(1)(A)(ii)(IX)$ and $1902(1)(2)$ of the Act are as follows:
Based on $\frac{140}{1}$ percent of the official Federal income poverty level (no less than 133 percent and no more than 185 percent).
Family Size Income Level
<u>4</u> \$
<u> </u>
* As revised annually in the <u>Federal Register</u> for the size family involved.
TN No. 92-1
Supersedes Approval Date AUG 2 5 1992 Effective Date March 31, 1992 TN No. 91-12

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Arizona

SUPPLEMENT 1 TO ATTACHMENT 2.6-A

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				State	: _		Ariz	ona											
						INC	OME EL	JGIBI	LITY	LEV	ELS	(Cont	inue	d)					
	В.			NAL CA			LLY NE								D TO	FEDE	RAL		
_		2.	<u>Chi</u>	ldren	Bet	ween	Ages	6 and	8										
			who age	are :	bor: are	n aft unde	eterminer Sep r 8 yea e Act	tember ars of	30, age	19: un:	33 a	nd who	hav	e a	ttai	ned 6	vea	dre: ars	n of
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					<u>Far</u>	nily	Size				Inc	ome L	evel						
						1 2 3 4 5 6 7 8 9	- - -				\$ \$ \$ \$								
						6 7 8 9 10	- - - -				\$ \$ \$ \$								
* As	revi	sed	ann	ually	in	the <u>F</u>	ederal	Regis	ster	for	the	size	fam	ily	invo	lved.			
	Sup	No. erse	des			ppro	val Dat	ce Al	UG 2	₅ 19	92		ectiv		ate ,	Marc	h 3	l,	1992

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State:	Arizona
	INCOME ELIGIBILITY LEVELS (Continued)

3. Aged and Disabled Individuals

Not Applicable

The levels for determining income eligibility for groups of aged and disabled individuals under the provisions of section 1902(m) (A) of the Act are as follows:

Based on _____ percent of the official Federal income poverty line.

Family Size	Income Level
1	\$
2	\$
3	\$
4	\$
5	\$

If an individual receives a title II benefit, any amount attributable to the most recent increase in the monthly insurance benefit as a resultofa title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the beginning of the month following the date of publication.

TK No. Supersedes TN No.

AUG 2 5 1992 Approval Date

Effective Date March 31, 1992

Revisio	n: HCFA-PM-91-4 AUGUST 1991	(BPD)	SUPPLEMENT 1 TO AT Page 8 OMB No.: 0938~	TACHMENT 2.6-A
	STATE PLAN U	NDER TITLE XIX OF	THE SOCIAL SECURIT	Y ACT
	State: Ari	zona		
	•	INCOME LEVELS (Continued)	
D. MED	ICALLY NEEDY	(Not Applicable)		
	Applicable to a		those specified group income le	ll groups except . below. Excepted evels are also
			listed on an at	tached page 3.
(1)	(2)	(3)	(4)	(5)
Family Size	Net income level protected for maintenance for months urban only	Amount by which Column (2) exceeds limits specified in 42 CFR 435.10071/	Net income level for persons living in rural areas for months	Amount by which Column (4) exceeds limits specified in 42 CFR 435.10072/
/ /	urban & rural			
,	arban B ratar			•
			<u>\$</u>	
2	\$	<u> </u>	\$	\$
3	\$	<u> </u>	\$	\$
4	_\$	\$	\$	\$
_For eac addi- tional person,	ch			
add:	\$	\$	\$	<u> </u>
payı			g from its claim for whose income exceed	
TN No.	92-1 des Approva	al Date AUG 2 5	1992 Effective Date	e January 1, 1992

HCFA ID: 7985E

Supersedes TN No. None

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(BPD)

SUPPLEMENT 1 TO ATTACHMENT 2.6-A

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	Arizona	

INCOME LEVELS (Continued)

D. MEDICALLY NEEDY

(Not Applicable)

(1)	(2)	(3)	(4)	(5)
Family Size	Net income level protected for maintenance for months	Amount by which Column (2) exceeds limits specified in 42 CFR	Net income level for persons living in rural areas for months	Amount by which Column (4) exceeds limits specified in 42 CFR
	urban only urban & rural	435.1007 ¹ /		435.1007½/
5	\$	<u> </u>	<u> </u>	\$
6	\$	\$	<u> </u>	<u> </u>
7	\$	\$	\$	<u> </u>
8	\$	\$	<u> </u>	\$
9	\$	\$	<u> </u>	\$
10	\$	<u> </u>	\$	\$\$
For each additional person,	n.			
add:	\$	\$	\$	\$

 $^{^{1\}prime}$ The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

TN No. 92-1			AUG 2 5 1992					
Supersedes TN No. None	Approval	Date	700 % 3 100E	Effective	Date	January	1,	1992
TN No. None				WCDA TD.	70055			

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